



On the Road to Equality:
Statewide Findings & Policy Recommendations



A report by the Women's Foundation of Minnesota
and a supplement to *Status of Girls in Minnesota* (April 2008)

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INTRODUCTION

On the Road to Equality is a supplement to *Status of Girls in Minnesota*, a report by the Women's Foundation of Minnesota in partnership with the Institute for Women's Policy Research (April 2008).

From May through July 2008, the Women's Foundation held community presentations and focus groups in 18 Minnesota communities — 12 in greater Minnesota, including Bemidji, Duluth, Grand Rapids, Marshall, Moorhead, Rochester, Virginia, Warroad, Willmar and St. Cloud; and six in the Twin Cities, including African American, Latino, Native American, Asian American, LBT (Lesbian, Bisexual, Transgender), and disabilities communities — to share key research findings and gain community input.

This report captures the voices and policy recommendations of the community, nonprofit and public leaders who participated in the focus groups. The data represent participants' perceptions of the challenges girls face in the state and the changes needed to secure their futures.

This report will serve as a road map for government, community, and business leaders to examine and advocate for policies that ensure all girls and women have equal access to opportunities and pathways that lead to success.

Methodology

The focus group protocol — developed by the Women's Foundation of Minnesota and based on *Status of Girls in Minnesota* — included questions and discussion focused in six areas: Socioeconomic Landscape, Teen Pregnancy, Mental Health & Risky Behaviors, Safety & Security, Education, and Work & Family Balance.

As previously noted, focus groups were held in 18 communities. Each focus group discussion was digitally recorded and notes were taken. Participants were assured anonymity. These raw data were then analyzed and synthesized. The presentation of data in this report offers readers a detailed analysis of participants' perceptions of the top issues facing girls in Minnesota, and solutions to those issues.

The focus group protocol and report methodology, along with more information about the statewide tour, can be viewed in the full report of *On the Road to Equality*, available online at www.wfmn.org.

A. SOCIOECONOMIC LANDSCAPE

It comes as no surprise that female-headed households make up the largest percentage of families in poverty, and those from underrepresented racial and ethnic groups are at particular risk of living below the poverty line.

In focus group discussions across the state, we asked participants to reflect on strategies for change that would help reduce poverty -- In other words, what strategies might not only reduce poverty, but *prevent* poverty.

As one focus group participant stated, “If we can keep people from getting into poverty in the first place, that’d be better than trying to help them out of it later.”

Review of the data across 18 Minnesota communities revealed the following *three key strategies* that would boost Minnesota’s socioeconomic outlook and accomplish the goal of helping women and families find pathways to economic security.

1. Increased access to quality childcare.
2. Increased access to quality education.
3. Increased earning potential and jobs.

1. Increased access to quality childcare

Participants were asked to reflect on the strategy of providing full-day early child care and education interventions for low-income and poor children, to offset some of the negative effects of poverty. Participants agreed that such a strategy would benefit families, but identified a variety of barriers in the current childcare system that does not support women finding secure pathways to economic self-sufficiency.

One key factor hinges on women’s primary concern for their children’s safety while they work. As one participant said, “Women face many barriers in achieving equal day care access...If the children are not safe, women cannot focus on other things,” such as finishing high school, getting a GED.

Another participant said, “Daycare is the largest concern for working women.”

On the one hand, high quality daycare costs are prohibitive. One participant said, “Childcare is a limited commodity with few spaces and can be very expensive.” On the other hand, there is a shortage of childcare facilities that care for sick children, children with special needs, or provide care during night or weekend shifts.

Add to this the fact that childcare facilities are not conveniently located in low income or rural communities, and many families are forced to resort to friends or family, including older siblings, to take care of young children.

High costs and inadequate childcare services stand in the way of women finding paths to economic security. “It is economics, not women’s desire to be home, that keeps them at home,” said one focus group participant.

2. Increased access to quality education

Participants identified the lack of access to quality education as a key factor that prevents women from finding pathways to economic security and stability.

One focus group participant stated, “Women still need to make the commitment to get a higher education in order to get adequate employment and break out of the cycle of poverty.”

However, many barriers to education were identified. First, the high cost of education is prohibitive. One participant said, “College educations are expensive...Most parents can only offer to children a high school diploma.” Another participant cited the high cost of childcare and its impact on educational access, stating, “Childcare is hard for women who are attending school.”

In addition to the high cost of higher education, participants felt parent education was needed to help parents be more involved in their children’s education. One participant said, “Parents need to be more involved in their children’s lives. Communities should promote family literacy programs so moms can get GED’s and thus become more involved in their children’s lives.”

The need for parents to learn financial and money management skills was also cited by participants: “Families hardly know anything about money,” and “Parents need to learn money management skills, how to set up a bank account, avoid credit card scams, apply for financial aid.”

Finally, various forms of racism were cited that compound the lack of educational access for women and girls of color.

The stigma of being questioned about documentation and legal status in the Latino community limits educational access for Latino girls. One participant said, “Girls always are afraid to take part in programs because they do not want to be asked for immigration papers...they must be educated on their rights, [because this] sometimes leads to girls not going to college.”

In the Native American community, one participant said, “The Native American community forces students to work, not to go to college.”

In the African American community, classrooms separated by gender and race were recommended: “We need to focus on girl education, as well as equal education, among

all races. Yes, we need gender-separated classrooms, and within that, race separate classrooms are even more effective.”

The issue of prejudice against disabled girls was raised. One participant said, “If able women have less of an opportunity to get an education, then most definitely, women with disabilities will not.”

Lack of access to quality education limits women and girls’ economic success. As one participant said very succinctly, “All children should start at the same starting line, and unless parents are equal, that cannot happen.”

3. Increased earning potential and more jobs

Focus group participants across the state felt that government should play a key role in eradicating poverty in female-headed households.

As one participant said, “Government or activist programs should do their best to begin battling poverty at the root of the problem by helping women raise their children in a non-poverty environment.”

Another participant said, “The minimum wage should be increased so that it can support a family. Inflation has pushed more people into poverty...the country and community need to ‘get real’ about profit and provide more jobs.”

The government’s role was stressed further by one participant and linked to the need for more political representation of women: “There is a huge problem with urban planning and housing. The paths that women travel in their daily commutes are not considered in urban planning and this can be detrimental to women’s work energy. Women’s voices need to be heard on these issues.”

This sentiment that government and communities can and need to provide more services to help women achieve economic security was echoed further by participants. Across the state, participants noted women’s struggles to earn enough money to support their families, and the lack of support women receive to do so.

As one participant said, “Mothers should... have the opportunity to receive ‘economic development job training’ that would lift women out of poverty by placing them in higher paying jobs.” Similarly, another participant stated, “Job training is a big factor that can help women achieve better paying jobs. Society needs to focus on women getting into these higher paying and decision-making jobs.”

Another participant stated, “In order for housing shelters to be most effective to its users, [it should offer] compound services, such as job searching and daycare, in addition to housing.”

The link between the lack of education and poverty was another consistent theme, which can be summed up in the following statement by one participant: “Women still need to make the commitment to get a higher education in order to get adequate employment and break out of the cycle of poverty.

Another participant put it this way: “There need to be jobs for the entire age spectrum. The community has cut itself short in education, and this has disproportionately affected women.”

The root of the high prevalence of women in poverty was traced to sexism by participants. One participant linked the lack of adequate childcare and lack of jobs for women by saying, “Many men have the mindset that women do not need better childcare because women should not be working in the first place.”

And, the prevalence of racism was cited as a factor that compounds and forces even more women of color into poverty. In the Latino community, one participant said, “There is a stigma against the Latino population, since their legal status is always in question. As a result, their access to services that support their economic status, such as insurance, education and jobs, is very limited.”

B. REPRODUCTIVE HEALTH AND TEEN PREGNANCY

In focus groups across Minnesota, community leaders reflected on the inadequacy of information teens receive about sexual health and teen pregnancy. And overall, participants felt the media misleads teens about sex, while other sources of information for teens are limited to abstinence or STDs.

Across the state, focus group participants *overwhelmingly* acknowledged the need for a more comprehensive approach to sex education for Minnesota’s teens.

As one participant said, “Sex education should cover more than just the biology of sex, but also the realities: the fear, the health risks and economic links, to the abuse of sex. There needs to be a new approach in schools.”

Community leaders identified three main strategies to increase girls’ reproductive health, overall:

1. Comprehensive, holistic, sex education programs.
2. Breaking the culture of silence.
3. Increased access to health care services.

1. Comprehensive, holistic sex education programs

Focus group participants were asked to respond to the following strategy for change: “Minnesota should implement mandatory comprehensive sex education in programs its public schools. These sex education programs should focus on how to avoid unintended pregnancy and STDs and provide information about sex that empowers girls to both delay and prepare for sexual activity.”

Overwhelmingly, participants said that comprehensive, holistic approaches to sex education were needed to combat rising rates of teen pregnancy across the state. Aware that teen pregnancy rates are declining overall in Minnesota and in the country as a whole, some rural communities and communities of color in Minnesota feel they are facing a “teen pregnancy epidemic.”

When queried about what comprehensive, sex education programs should look like, participants generally felt that teens should learn about sexual health broadly and specifically.

For instance, one participant said, “The state of Minnesota is requesting that schools teach abstinence-only sex education, but this education rejects the sex awareness component, because students first and foremost need to protect themselves and respect their bodies. It’s not about abortion; it’s about women having access to contraception and to be educated about one’s body.”

Participants were also concerned about the rising rates of STDs among teens. One participant said, “The rates of STD infection are alarming and appearing at younger ages.” In another community, one participant echoed this concern: “My community is teaching about STDs because we’re so afraid of them, although, teaching about pregnancy and contraceptives is harder.”

Many communities admitted to piecing together sexual health information based on how much information health programs and educators are able to provide without stirring up controversy in their communities.

Regardless of what curriculum is offered in schools, there was consensus that youth need to have safe environments to discuss their questions, experiences, and concerns with peers and with adults.

One participant said, “Although sex education may be taught in schools, there may not be openness between students and teachers to talk about sensitive topics.” Small groups, peer groups, and mentor relationships were suggested in several communities as ways to help young people make smart choices about sex.

“There needs to be a *collaborative* group where teens can talk about healthy relationships, dating violence, and sexual behavior with other peers and older mentors,” said one participant. The importance of youth programs was acknowledged as an

essential method of increasing young people's ability to make informed decisions in many aspects of their lives.

2. Breaking the culture of silence

In several communities, participants noted the difficulties of talking about teens' sexual health openly.

One participant said, "The community itself is very careful about where and when it talks about sex, because this area of the state is very conservative compared to the rest of the state. However, I believe it firmly that the key is to talk openly and for our kids to talk openly. Right now in [our community], we don't talk about it; it is abnormal and it is unusual."

Another participant said, "When I worked in the high school...the school nurse was supposed to give information about contraception; now, the nurse doesn't believe in giving contraception, so it's abstinence only. The school serves 1,300 kids and 600 girls, and it's sad that the girls aren't getting this as a resource."

It would seem if communities are to increase sexual health programming for teens, this culture of silence around the issue will need to be broken. Yet the culture of silence exists because of the extreme conservatism in some communities that makes talking about sex comprehensively taboo.

One participant said, "[Our community] is a relatively conservative area of Minnesota and the community is very involved with the sex education curriculum taught in school. Parents have the choice to view the material first and decide for their child to opt in or out."

Another participant said, "The community is very conservative and has many fundamentalists. It does not seem that Minnesota would pass mandatory sex education in schools under the current governor."

3. Increase access to health care services

Another key strategy to increase reproductive health is to increase access to health care services.

Limited access is often simply due to location (distance) and cost. "In many rural communities, the nearest abortion clinic is more than 60 miles away," said one community leader (focus group participant).

Cost is a key limiting factor. “Birth control and other health check-ups, such as STD testing, need repeated testing,” explained one participant, “Some girls are not willing, or can’t afford, to seek services if they must pay.”

Another participant elaborated on the compounded difficulty of seeking services: “She has to think about how she will get it, especially if it’s far away – it costs money to drive there and maybe stay overnight, and the actual cost of services.”

The lack of culturally appropriate health care services is also an important limiting factor. Culturally appropriate services are needed for LGBT (lesbian, gay, bisexual, transgender) communities and disabled communities, as well as communities of color.

One LGBT community leader explained, “Clinics will turn away transgendered youth because they don’t know what to do with them.” Another community leader related that in rural areas the problem is exacerbated: “There are very few resources in greater Minnesota that concern LGBT youth directly.”

In the disabled community, focus group participants noted that they see higher rates of pregnancy among girls who have a disability as compared to girls without a disability – somewhat analogous to the higher rates of pregnancy among many girls of color.

However, as one participant observed, “There is little or no sex education for girls with disabilities because many educators assume that disabled women will not have sex.”

Another participant added, “Some women in wheelchairs do not receive OB-GYN care, because doctors do not have appropriate lifts and exam tables. Clinics must have full access and accept [all] people to their clinics.”

The need for increased access to health care services is alarming. As one participant stated, “The kids who need it the most are not getting it.”

In both rural and urban areas, communities of color have difficulty finding culturally appropriate health care services that take “traditional beliefs of sexuality and child birth” into account. Another participant echoed this: “Barriers to health care are also compounded for immigrant girls.” As one community leader observed, “Most of these pregnancy ‘problems’ affect first-generation girls.”

Many rural and ethnic communities struggle with teen pregnancy because parents do want their girls to be successful. However, with limited opportunities “...many girls are pushed to settle down into relationships, marriage, and children,” instead.

The challenges of teen pregnancy most often fall on young women; accordingly, resources should be allocated to help single mothers – who make up the majority of poor families – break the cycle of poverty.

“We want girls to know that even if they do have a baby at a young age, their life isn’t necessarily over. But nowadays, our society just isn’t set up to support women who choose to [keep] their baby.”

Some participants suggested that all teens should learn more about the “male responsibility of raising a child.” In the meantime, one participant said, “Communities cannot ostracize teen mothers.”

This sentiment was reinforced in other focus groups: “It is important that society offers opportunities to young mothers so children can be raised properly.” However, another participant summarized the current situation, “There are little resources for girls to find.”

C. SAFETY AND SECURITY

Focus group participants in 18 communities across the state agreed that girls are confronted with unprecedented levels of violence. Physical and sexual abuse is all too common at home, at school and in the community, affecting women and girls of all ethnicities and all socioeconomic classes.

To make matters worse, it is underreported, for a variety of cultural, economic, and gendered reasons. As one focus group participant stated, “Much of the violence that occurs against teenage girls is underreported. Girls often feel that it is their own fault for being abused and as a result, many of them do not prosecute the offenders.”

Another focus group participant stated, “Many queer youth are not comfortable revealing the fact they are abused. Therefore, the statistic is most likely much greater than reported. This is an important fact to take into consideration, since safety is the prevailing issue facing these youth.”

Girls are exposed to violence in many forms, from child abuse, bullying in schools, gang violence, domestic violence, to sexual violence. In focus group after focus group, participants described the level and types of violence girls are too often exposed to.

“Duluth is a hub for sex trafficking, and Native American girls are the most vulnerable,” explained one focus group participant.

Regarding child abuse, one participant said, “What society thinks of as child abuse is overestimated; signs of abuse exist before the beatings. The other devastating abuse is the daily neglect and emotional conflicts.”

Another participant stated, “Gang violence is escalating in the community.”

Unfortunately, the prevalence of violence against women and girls has helped make violence a cultural *norm* in Minnesota, too often leaving the burden of recovery on women and girls.

One focus group participant pointed out that the media is responsible for establishment of this norm: “The media is a large influence in the acceptance of violence in our society because of the violent sexual content on television, in movies, and in magazines. In Europe, there are many sexual things on television. But my son-in-law reminds me that one assumes that people are sexual beings and someday will grow up and have sex...but one *doesn't* assume that all people are violent and will grow up to be violent. In America, we won't show the sex stuff...and yet we show violence everyday, all day, over and over.”

Because there is so much violence against women and girls in so many communities in Minnesota, participants were asked to consider whether a strategy of education for girls and boys about the harmfulness of physical and sexual violence against women and girls, in the home, schools, the community and media, was a valid strategy for change.

Participants were also asked to recommend other strategies as well. They outlined three main strategies:

1. Change the environments where girls experience high levels of violence.
2. Ensure youth have access to violence prevention programs that build their capacity to combat violence in their lives.
3. Break the cultural of silence.

1. Change the environments where girls experience high levels of violence

Focus group participants repeatedly commented on the level of violence in schools.

“The bullying protection policies in schools are not overt; students do not know that they are a part of a protected group and should report bullying. Authorities and parents must be trained on their students' rights,” said one participant. Another participant said, “In schools, it was a great sport for males to harass girls. This is unacceptable.” Another participant said, “Schools and homes should be two places where children can feel safe. However, this is not so and teachers are so burdened by safety issues that the education is compromised.”

Children of color experience violence in schools at higher rates. One participant said, “Many children do not want to go to school because of the discrimination that the Latino children face at school. Fights and gang conflicts are common at schools, and this is unacceptable, since many children see school as a safe and healthy environment.”

Many participants felt that greater responsibility for school safety should be taken by teachers, school officials, and community members.

Participants also commented on the high incidence of gang violence that girls are exposed to. “There is gang violence in [one community]. Older gangs target and recruit young [members], and ‘wannabes’ are more dangerous because they try to ‘prove’ themselves to the older gangs.”

Another participant explained, “Girls are getting into gangs because it gives them a place to belong. It is difficult for parents to talk to their children because they are always working. There is no extended family and network of support. Girls thus recruit others to support one another.”

Participants spoke assertively about the problem of violence: “There is a huge problem with gangs in [one community]. Both boys and girls join gangs, but their initiations are different. Boys are beaten up to join, while girls must subject themselves to have sex with a number of boys in the gang. There is a climate of being an object and of being used without protection and without concern for the girls.”

These comments beg the question of the kind of supports needed in communities to transform them and make them safe.

2. Ensure youth have access to violence prevention programs that build their capacity to combat violence in their lives

Much of the work to transform schools and communities to make them violence-free can be achieved through programs for youth that build their capacity to confront violence in their lives, because these programs, in addition to helping youth, also keep the issue of violence and the need for such programs in the community’s dialogue.

Participants overwhelmingly felt quality programs were needed to achieve this dual goal. Some of the programming mentioned most often included:

- **Mentoring programs:**

“Social services must be strengthened. Mentorships for girls and women are needed in order to educate them about how to best care for themselves against poverty and violence.”

“Girls need to learn how to identify an abusive relationship. Schools should provide mentors or counselors to whom teenagers can turn to when they see abuse in the home.”

- **Youth antiviolence programs:**

“An antiviolence curriculum is mandated in schools, but it is unfunded and unenforced.”

“There needs to be country-wide programs against violence. State funding has been

cut for these programs, and it has become tougher and tougher to fund them.”

“Action groups need to be developed against violence in the disabled community.”

- **Making smart choices:**

“We need to do a better job with letting girls know how to make good decisions, because they are the ones who are most likely going to raise the children, and the little boys and girls need to grow up knowing that it is not okay to physically abuse others.”

“[One community] has programs for girls of all ages in school to be smart and aware of violence. The girls then are referred to school counselors to build a relationship of trust. This program has also shown girls the risk of dating older men, some as old as 25 years.”

- **Leadership development:**

“There is a specific police force for gangs to get these individuals involved in boys’ and girls’ clubs that provide the context for belonging, leadership development and stature.”

“For violence, just like for teen pregnancy, education is the key -- but sometimes, it is not enough. Teenagers need leadership and mentorships in addition to further change.”

In addition to youth programs, participants felt parent education was also needed:

- **Parent education:**

“There’s lots of immature parenting right now, and a disparity between what is taught in schools and what is taught at home. Parenting education needs to be augmented, but the problem is that those parents who need the education the most do not seek it.”

3. Break the culture of silence

It comes as no surprise that, as one focus group participant stated, “...cultural groups have a tendency to stay silent about reporting violence.”

There are many reasons why communities of color are reluctant to report violence in their families and communities. “Women and families are afraid of punitive consequences that can incur in turning their husband into the authorities,” explained another participant.

Across all focus groups held specifically with communities of color, leaders linked the violence within their communities to the violence they experienced in the larger community. Violence can become the norm, as one community leader stated.

“Girls often feel that it is their own fault for being abused, and as a result, many of them do not prosecute the offenders. We need to address the ‘historic’ or ‘internalized’ violence, in order to heal,” said another community leader. Leaders stressed that culturally specific programs help families understand the layers of abuse, heal from it, and prevent further violence.

The “culture of silence” and the need for parent education are not exclusive to communities of color, as one participant said, “There’s lots of immature parenting. The problem is parents who need parenting education the most do not seek it.”

A participant in another cultural community had a similar perspective about the need for family programs to prevent violence: “People are afraid of the gossip.” It prevents, said this participant, parents from seeking help or pressing charges.

A leader in the business community stated, “An employee may be a good lawyer or manager, but that doesn’t necessarily make them a good parent. They may have spent years in school, but not learned how to be a good parent.”

Many community leaders suggested parent education programs as a way to build community awareness and break the culture of silence: “There needs to be an ideological change about safety.”

D. MENTAL HEALTH AND RISKY BEHAVIORS

Across the 18 communities that participated in the focus groups, participants commonly identified girls’ low self-esteem as a growing problem leading to undiagnosed (but apparent) depression, and thus putting girls at risk for many self-destructive, risky behaviors.

Because the issue of mental health remains stigmatized and underreported in many communities, girls’ mental health needs remain difficult to diagnose and treat. In addition, diagnosed mental health disorders, such as clinical depression, are also difficult to treat due to a shortage of mental health care services and providers across the state.

Consequently, participants identified four key strategies to improve girls’ mental health. They are:

1. Remove burden of sexism that defines girls’ roles in society.
2. Understand the depth and breadth of risky behaviors girls are engaging in.
3. Build girls’ self esteem and aspirations through key programs.
4. Increase access to mental health services.

1. Remove burden of sexism that defines girls' roles in society

Participants agreed that girls' are primarily thrust into roles that define them as secondary to men in American society.

One participant said, "Parents expect their daughters to take care of the family. Parents cry for help to manage their families, but when confronted with the aspect of rearranging the responsibilities in the family, many parents balk at the cultural confrontation."

Consequently, girls continue to carry the unequal burden of caring for the home and often, their siblings. Another participant said it this way: "Empowering girls can only go so far when the families remain the same, culturally. The girls may be as smart as possible, but when they come home, they are expected to play dumb."

Similarly, from an ethnic and cultural perspective, one participant said, "Somali girls will not admit that they have depression. From a cultural standpoint, females need to support the family, leaving little time for the girls to take care of themselves. Parents consider it shameful for their daughters to admit to a mental weakness."

In addition to being defined as the primary caretakers at young ages, girls are assigned the role of being sexual objects in American society, created for men's pleasure. One participant claimed, "Girls nowadays are completely objectified. They are hyper-sexualized from a very young age through the growth of websites such as YouTube and My Space."

Another participant said, "Media nowadays is inappropriate for children to watch. The media is not setting a good example about [girls'] self-esteem, body image or good behavior."

Participants were at a loss as to how to limit the impact of the media on girls' self image, and one participant underscored this: "Girls are receiving mixed messages about their sexuality from their churches and their families. Sexual abusers often take advantage of this ambiguity, thus hurting girls and their self-esteem. Violence is growing in the girls' community."

Another said, "Young women bully each other about negative body images and self-esteem. With the rise of the Internet, cyber bullying is becoming an increasingly popular and detrimental method to pressure girls' self-image and demean their confidence."

Given these realities, it's no wonder many girls find it difficult to aspire beyond the rigid roles that society has imposed upon and prescribed for them, focus group participants remarked.

Society's expectations for girls and their family obligations often take precedence over girls' personal goals. Communities must apply fair expectations to girls at home, at

school, and in the larger society. As one community leader stated, “We need to get everyone up to their own personal best level.”

2. Understand the depth and breadth of risky behaviors girls are engaging in

Many focus group participants were concerned about the growing and alarming number of girls who, as one participant said “participate in self-destructive behaviors.”

In many communities across the state, participants spoke of an extensive variety of risky behaviors that girls’ are engaging in, such as alcohol abuse, drug abuse, eating disorders and promiscuous sexual behavior.

One participant said, “There is such a huge problem with body image among girls that some young women are so concerned with their body that they will use crystal meth as a dieting aid.”

Another participant said, “Prescription drugs are a big and new issue. I think of drug abuse as city-related stuff, but it is happening in our schools.”

Community leaders in rural communities pointed out that, “Girls and boys in the rural areas first begin to get drunk in the 5th and 6th grades, an age much younger than those kids in the metro areas. These kids hook up with others to belong to a group and because they do not have anything else to participate in.”

Leaders in the disabilities community reported that 70 percent of disabled individuals abuse chemicals or alcohol. “They have nothing to look forward to, are afraid of the streets after dark, and “4 p.m. Happy Hour” looks very happy,” said one participant..

Unfortunately, not only is the incidence of risky behavior increasing, the type of behaviors girls are engaging in is also expanding, according to participants.

One participant said, “Many girls participate in self destructive behaviors, such as cutting wrists or dating older men.”

Participants noted that all of these risky behaviors (eating disorders, drug and alcohol abuse, and promiscuous sexual behavior) are indicators of depression that in too many cases leads girls to suicide.

The high incidence of depression was highlighted by one participant who stated, “Doctors or parents put kids on medication, which is the most widely abused drug.”

Regarding suicide, another participant said, “It’s like a fashion, or a fad! There are groups that cut their veins, and there are even some that hang themselves.” In Kandiyohi County alone, one participant reported that 29 to 35 percent of girls have suicidal thoughts and attempts.

Another focus group participant said, “The number of those who engage in risky behaviors is underreported.”

3. Build girls’ self esteem and aspirations through key programs

In focus groups, participants discussed strategies to prevent girls’ low self-esteem and circumvent risky behaviors. Participants in most of the focus groups agreed that key programs are needed to stem the tide of risky, self-destructive behaviors many girls are engaging in.

One participant said, “School sports and extracurricular activities are expensive; however, access to programs and activities is the key to adolescent wellbeing.”

However, another participant stated, “Because there have been so many cuts in after-school programs, students are consequently not using [after school] hours to study or participate in youth programs. This leads to many other problems, risky behaviors and pregnancies.”

Participants spoke of a wide variety of programs they felt were needed to build girls’ self-esteem and aspirations, such as:

- **Mentoring:**
“Mentoring programs are also important to build girls’ self-esteem, but they are currently receiving very little funding, because the members of the [school] board are all male.”
- **Conflict management and anti-bullying:**
“There need to be programs that teach conflict management and anti-bullying that is reinforced through the schools and community.”
- **Culturally specific:**
“Also important are culturally specific programs that can help build self esteem for minorities.”

“In the Somali community, there is a new support program for Somali older women. If elder women can start talking about depression, then the stigma against depression and isolation can begin to be avoided.”

“Focus groups need to be conducted in the [Latino] community to gather what girls need to fight against feelings of isolation, depression and self-esteem. The money needs to be placed with the girls where it can best be used and empower them to say ‘I can do it.’”

“There need to be programs that strengthen Native American children’s bodies and

minds. These children and students need resources and opportunities to enrich themselves in their own cultures and to learn about how to take care of themselves in this new society.”

- **Community-specific programs:**

“Mentor programs need to be created for the disabled. Those with disabilities rarely have people to look forward to, and organizations such as Courage Center show the disabled that they have self-worth and should not think that they are worth nothing.”

“There was a program for students once where they went to school for four days a week, and then interned for one day at a business. These businesses and schools had a symbiotic relationship, and to have this for queer (LGBT) youth would deeply help increase their self-esteem.”

- **Sports, athletics and fitness:**

“There is an organization called River Valley (a division of Girl Scouts) that develops girl programs about beauty and sports and fitness.”

- **Self-esteem:**

“School programs need to directly address the issues of mental health and self-esteem. A self-esteem class should be introduced and embedded in the middle-school curriculum, since this age period is a critical time for students’ character development.”

- **Coping skills:**

“Coping skills from stress, peer pressure, etc., need to be taught in order to demonstrate to students that there are alternative and better ways to solve these kinds of problems, rather than turning to sex, drugs and alcohol.”

- **Healthy body image:**

“Society needs to tell girls that they are important and beautiful. Girls need to hear these messages.”

- **Programs in schools:**

“High schools do have guidance counselors, but they are constantly overbooked and focused on higher education. Communities should increase counselors, particularly in isolated communities, with whom girls can talk to about self-esteem and depression.”

As one participant so succinctly put it, “When girls are actively engaged in programs that are providing leadership and support, their self-esteem is fueled and they see the potential that they have to succeed.”

However, programs for girls are limited in many Minnesota communities. As one participant stated, “Afterschool programs, sports, and extra curricular activities are expensive.”

Another participant said, “There are programs, such as *New Moon*, a girl-run magazine, that can empower young girls, but often they are limited to upper- and middle-class girls.”

One participant said that in some greater Minnesota communities, “There are no other youth activities outside of sports, leaving young women with few options, because sports programs continue to be focused on boys.”

Disabled persons, in particular, lack positive programs that increase self-esteem and opportunities, leaving them with negative coping mechanisms.

4. Increase access to mental health services

Access to mental health services is a challenge in many communities. The three main factors that limit access to mental health care are very similar to factors mentioned earlier in this report regarding reproductive health care:

1. Lack of mental health care providers, particularly in rural communities
2. Fragmented mental health system
3. Lack of culturally competent mental health services

One community leader stated a key problem: “There is a [mental health] service provider shortage in the community.” This means there are not enough mental health professionals, not enough locations and facilities, and limited types of services offered.

Rural communities are especially stretched by the lack of mental health resources. As one participant said, “In fact, police officers are being assigned to home care, so mental health patients [won’t] show up in the justice system. Showing up to make sure X takes their meds is cheaper than waiting for that person to commit a crime, because of lack of mental capacity, then needing to drive three hours to the mental health facility, if we pick them up.”

In addition to the shortage of providers, the mental health system is difficult to navigate. “The mental health world is fragmented between insurance companies and mental health facilities,” explained one participant. “People are unable to get help when or where they need it.

For young people, access to mental health services is very limited although many community leaders noted the increasing number of youth who need services. As one participant stated, “More students are recognized and diagnosed with mental health problems.”

Another participant noted the need for more guidance counselors in both rural and urban schools, by saying “We have one full time counselor [in high school], but we could easily use five.”

One participant highlighted the lack of cultural and diverse community competency among mental health providers by saying, “In order to have access to mental and physical health care, transgender youth must first be labeled as having a *disorder*. Many youth detest this label.”

More broadly, another participant pointed out, “Too often, doctors or parents put kids on medication before they fully understand the causes of behavioral problems. This quick-fix contributes to the problem, as prescription drugs are the most widely abused drugs.”

To compound the problem, some immigrant communities and communities of color have cultural stigmas against mental health problems. Often, communities are reluctant to admit to mental weaknesses. Lack of culturally competent mental health services prevents communities of color from seeking and receiving mental health services.

Therefore, services need to be culturally appropriate to support families who want to take advantage of programs. According to one participant, “In addition, language barriers prevent many immigrants from getting services they need.”

Increasing access to mental health services calls for increased competency of already scarce service providers.

E. EDUCATION AND WORK LIFE BALANCE

The link between lack of access to quality education and poverty was established in the Socioeconomic Landscape section of this report. In this section, various factors of the educational system’s failure of women and girls will be explored in more detail, along with suggestions of ways to improve educational outcomes for women and girls. Additionally, the tremendous toll taken in girls’ educational success by being forced into gendered roles that involve caring for siblings and doing chores at home will also be explored. One participant stated it in this way: “The education system in general is not a very solid system in the community. The schools do not have a focus on girls, and as a result, many of the academic problems as well as issues with women in poverty are still occurring in today’s society. The schools need to focus on the two genders separately and equally in order to address these problems that are plaguing women.”

Two broad areas were addressed:

1. Prevalence of gender stereotypes that limit girls aspirations.
2. The need to apply a gender lens to change and improve the educational system and outcomes for girls.

1. Prevalence of gender stereotypes abound that limit girls' aspirations.

Across the state, focus group participants articulated this in various ways, including: “Gender stereotypes still believe that ‘when push comes to shove, women will choose their families [over their jobs]’.”

The reasons for this, according to participants, are many.

One participant said, “Women are educated to balance work and life, while men are taught just to work.”

In one ethnic community, a participant made the following statement: “In [our community] if you’re a girl, your life is house chores, babysitting, and school. If you’re a boy, you are a king.”

In rural Minnesota, one participant said, “There is more of an agricultural background in [our community], which means... that...gender roles are still entrenched in the types of chores done, but to achieve balance in the home, boys need to be contributors as well as girls.”

Participants strongly felt that these enforced gender roles limit girls’ educational aspirations and success.

One participant said, “Educators need to understand that girls and boys are wired differently. Some have noticed that striving for perfection causes depression in girls. As a result, one of the biggest challenges is that girls have a lack of high aspirations to become ‘super women.’ They don’t see a career as ‘fulfilling.’ It’s all about marriage and children.”

Another said, “Girls must become excited about higher education and college, and not just to become mothers.”

2. Improve the educational system by applying a gender lens.

So, what should be done to increase girls’ educational aspirations and success? How can we ensure that, as one participant put it, “Education is a pipeline for a sound economic future,” or as another participant said, “We have to tell kids that education is one of the surest pathways out of poverty, rather than being stuck at home taking care of 10 kids! We have to be very clear about that.”

The following are some of the key changes that focus group participants recommended:

- **Increase special programs and curricula for girls.** Participants talked of the need for specialized programs and curricula for girls in various ways:

“Schools should work with girls in middle school and use different models to encourage them to achieve high grades.”;

“Academic tutoring programs can give help to the students who need it.”;

“Schools need to tailor their curriculum to their students’ concerns and needs, so that the ‘soul’ can come back to learning knowledge.”; and

“Students need to work together to move through ‘trouble-age periods.’ A curriculum needs to be in place that is gender-specific and promotes self-esteem.”

- **Increase girls’ performance in science and math.** The need to educate girls in math and science was captured by one participant who said, “There needs to be promotion of math and science programs to girls specifically and lead them to higher sciences. Girls need the message that it is good to be smart, especially since the gap between high performers and other girls is huge.”

Another participant said, “Gender bias is also a continuing problem that subconsciously pushes girls out of predominantly male jobs in math and science.”

- **Increase girls’ access to non traditional education and careers.** More needs to be done to encourage girls to go into nontraditional careers. One participant said, “Girls should be introduced to technical jobs, and the importance of goal setting and expanding interests in academics. Ingenuity Frontier—Project Lead concentrates on pre-engineering for girls.”

Another said, “Women are an untapped human resource and very few are encouraged to take up skilled trade jobs. The community needs to encourage women to go into nontraditional careers.”

- **Segregate classrooms by gender.** Several participants recommended segregating classrooms by gender as a way to improve educational outcomes for girls.

One participant said, “[A specific community] should introduce gender-segregated classrooms. Teachers teach to the boys – we address their behaviors, defer to them, give them more time, more confidence pats...it’s engrained in our girls and in our teachers to teach that way...and while boys do not necessarily thrive in segregated classrooms, girls often do very well in segregated classrooms.”

Another said, “According to research done by the Superintendent of St. Paul Public schools, girls who are enrolled in gender-specific classrooms learn faster and do better in the typically problems areas of science and math. Girls tend to feel intimidated in classrooms where there are boys, especially in their adolescence when they begin to notice boys, and their grades begin to drop off. If they do not have that threat present in the classroom, then they can achieve to their best potential.”

- **Improve girls' performance on standardized tests.** Overall, participants felt that measures other than just standardized tests should be put in place to measure students' success.

As one participant said, "There needs to be a more universal way to measure a student's readiness for college than simply relying on standardized test scores, such as the ACT and SAT, since not every high school student takes these tests."

As for girls, participants offered explanations for girls' poorer performance on standardized tests:

"Girls score lower on standardized tests than boys because girls' self-esteem is lower in comparison to boys. Girls become stressed with the idea of a one-time, no-retake standardized test, leading them to lose confidence and second-guess the answers...", and,

"Grading in schools is no longer results-based. Grading is now influenced by behavior, with students achieving 'behavior points' based on their behavior in class, and girls sometimes rely on these points to get good grades and then are thrown when standardized tests are not graded in this similar behavior-based manner."

- **Increase teachers' expectations of girls.** Participants felt that low teacher expectations impact girls' educational achievement.

One participant said, "Teachers need to all believe that their students can achieve."

Another participant said, "Teachers still have gender biases, and as long as the girls are not disruptive, teachers do not worry about the girls."

- **Increase teachers' effectiveness through knowledge of girls' learning styles.** Some participants recommended classroom techniques that favor girls' learning styles:

"Programs in schools need to adjust the teaching methods and materials to how girls learn the best: through cooperation and tangible personal relations."

Another participant said, "Girls thrive when they are together in a small group."

- **Increase girls' access to role models.** Participants emphasized the need for more role models for girls to help them increase their aspirations and envision success, both culturally and within career contexts:

"Students need to interact with successful Latina and Latino role models who can show them that success is possible. These students deserve success."

"Schools need to do their best to provide professional mentorships to their [girl]

students in nontraditional careers, and also to do more outreach to communities of color.”

SUMMARY OF FINDINGS & RECOMMENDATIONS

On an 18 community Road to Equality tour of Minnesota, of communities in Greater Minnesota and the Twin Cities metropolitan area, community leaders, public officials and nonprofit leaders shared their perceptions of the challenges girls face in Minnesota and the changes needed to secure their futures.

Across focus areas, leaders described a state of affairs that is alarming when considering the future success of Minnesota’s girls.

The number of female-headed households in poverty is alarming. The lack of comprehensive, holistic sex education for teens was noted by leaders, along with ways many have tried to circumvent prevailing notions of abstinence to embrace more realistic methods of educating teens about their sexual health and avoid controversy.

The rise of a teen pregnancy “epidemic” was discussed, among girls of color particularly, and in rural communities too, especially in light of decreasing rates of teen pregnancy in the state overall, and in the country as a whole.

The pervasiveness of violence, in many forms, against women and girls was raised as an area of concern. Girls are confronted with unprecedented levels of violence, including child abuse, domestic violence, sexual violence, gang violence and bullying in schools.

Leaders described a host of self-destructive behaviors girls are engaged in, largely in response to poverty and violence in their lives, including sex, alcohol, and drug abuse, as well as dating older men and eating disorders.

And, access to education continues to be elusive, based on socio-economic and racial status.

The matrix below outlines the preceding specific concerns and recommendations raised in each area of focus during focus group interviews across the state:

Key Concerns and Recommendations by Area Studied

Socioeconomic Landscape	Teen Pregnancy and Reproductive Health	Mental Health and Risky Behaviors	Safety and Security	Education and Work-Life Balance
Increase access to quality childcare	Increase access to health care services	Increase access to mental health services		
Increase access to quality education	Comprehensive, holistic sex education programs needed	Build girls' self-esteem and aspirations through key programs	Ensure youth have access to violence prevention programs that build their capacity	Ensure educational programs build girls' knowledge, self-esteem and confidence
Increase earning potential and jobs				
	Break culture of silence		Break culture of silence	
		Remove burden of sexism that defines girls' roles in society		Recognize prevalence of gender stereotypes that limit girls' aspirations
		Understand depth and breadth of risky behaviors girls are engaging in and environments that need to change as a result	Change environments in which girls are confronted with high levels of violence	Recognize need to apply gender lens to change and improve the educational system to get better outcomes for girls

Based on these concerns, the following conclusions can be drawn:

1. There is limited access to many of the services women and girls need to thrive.

The dire status of women and girls in Minnesota has generated the need for many services to which access is severely limited. To rise out of poverty, women need a breadth of specific services aimed at helping them pave the road to economic self-sufficiency.

Over and over again, in focus groups across 18 communities in Minnesota, we heard how the lack and shortage of specific services stood in the way of women stepping onto pathways of economic success.

Specifically:

- **Childcare** – Childcare is the biggest concern for working women, particularly concern for their children’s safety and well-being. Add to that the high costs of childcare services and lack of adequate childcare services to meet special needs and circumstances, and the result is a childcare system that doesn’t work, particularly for low income women.

“Women face many barriers in achieving equal day care access. If the children are not safe, women cannot focus on other things, such as finishing high school or getting a GED.”

- **Education** – Though education is viewed as the main pathway out of poverty, getting an education is very difficult for poor women. One, higher education is expensive. And, as previously noted, childcare is inadequate as well, and also expensive.

Women are faced with the need to be involved in their own children’s education, too, and often need parent education to increase their capacities.

And, the inadequacy of educational systems serving girls of color, disabled girls, and lesbian girls, due to issues of sexism and racism was also noted.

“Women still need to make the commitment to get a higher education in order to get adequate employment and break out of the cycle of poverty.”

- **Jobs** – Participants saw increased employment opportunities for women government’s job. Yet, the lack of political representation of women in government was cited as a deterrent to increased job opportunities for women.

The lack of education and job training disproportionately affects women.

The lack of job training for women was a key factor in limiting women’s earning potential. Lack of employment for women was traced to sexist roots and prevailing

male attitudes toward women that place them in the home. For instance, questioning women's legal status deters undocumented women's access to services and employment.

"Government or activist programs should do their best to begin battling poverty at the root of the problem by helping women raise their children in a non-poverty environment."

"If we can keep people from getting into poverty in the first place, that'd be better than trying to help them out of it later."

- **Healthcare** – Distance, particularly in greater Minnesota, and high costs across the state, were cited as barriers to adequate healthcare, particularly reproductive health care for teens.

Additionally, the lack of culturally appropriate health care was cited as limiting access in many areas of the state, both rural and urban.

Appropriate services for disabled girls and lesbians were scarce also.

"Some girls are not willing, or can't afford, to seek services if they must pay."

"She has to think about how she will get services, especially if it's far away – it costs money to drive there and maybe stay overnight, and the actual cost of services."

- **Mental Health Services** – Factors that limit access for women and girls to mental health services are:
 - a severe shortage of mental health providers, particularly in Greater Minnesota;
 - the difficulty women and girls have negotiating a fragmented mental health system, inadequate services for girls in general; and
 - inadequate services for women and girls from diverse cultural communities, specifically.

Stigmas against mental health issues within diverse communities were also cited as limiting access for communities of color and immigrant communities.

2. Entrenched sexism and racism limit girls' future aspirations.

Sexism and racism were often cited as the root causes for many of the conditions and challenges women and girls face in Minnesota, from poverty to high levels of violence against women.

- **Sexism** – A prevailing, underlying notion that women should stay home and take care of children was seen at the root of a broken childcare system. Furthermore, girls are thrust into rigid roles of taking care of siblings and caring for the home at very early ages, thus limiting their aspirations and dreams of success beyond the roles imposed upon them.

Additionally, the media often objectifies and sexualizes girls, and assigns them to roles of existing for men's pleasure. This leads girls to depression and to engaging in many risky behaviors, from sexual promiscuity to eating disorders to maintain unhealthy body images, to the abuse of drugs and alcohol.

“Empowering girls can only go so far when the families culturally remain the same. The girls may be as smart as possible, but when they come home they are expected to play dumb.”

“Girls nowadays are completely objectified. They are hyper-sexualized from a very young age through the growth of websites such as YouTube and My Space.”

- **Racism** – High levels of poverty and teen pregnancy among women and girls of color was traced to racist practices, e.g. discrimination of the Latino community by constant questioning about legal status that instills a great deal of fear in the community, and sex trafficking in Minnesota that puts Native American girls at highest risk.

“[Latina] girls are always afraid to take part in programs, because they do not want to be asked for immigration papers. They must be educated on their rights, and this sometimes leads girls not going to college.”

3. A culture of silence suppresses public discussion of critical issues facing women and girls.

A prevailing culture of silence makes discussion of teens' sexual health and violence against women taboo in many communities:

- **Teens' sexual health** - According to participants, there is a culture of silence -- an unwillingness to talk opening about topics -- such as teens' sexual health, particularly in politically conservative areas of the state.

“The community itself is very careful about where and when it talks about sex, because this area of the state is very conservative compared to the rest of the state. However, I believe it firmly that the key is to talk openly, and for our kids to talk openly. Right now in [our community], we don't talk about it; it is abnormal and it is unusual.”

- **Violence against women and girls** - A culture of silence also pervades discussions of violence against women and girls, particularly in communities of color. Communities of color are reluctant to report violence in their families and communities, for fear of more punitive reprisals from the larger community that discriminates against them.

“Women and families are afraid of punitive consequences that can incur in turning their husband into the authorities.”

“Girls often feel that it is their own fault for being abused, and as a result, many of them do not prosecute the offenders. We need to address the ‘historic’ or ‘internalized’ violence in order to heal.”

4. Holistic, coordinated programs are needed build girls’ self-esteem and aspirations.

Across the areas studied, a consistent call for coordinated, innovative programming for girls was made.

“When girls are actively engaged in programs that are providing leadership and support, their self-esteem is fueled and they see the potential to succeed. However, programs for girls are limited in many Minnesota communities.”

The matrix on the following page shows what this call looks like across the areas studied:

Breakdown of Recommended Programs by Area Studied

Programs	Socioeconomics	Reproductive Health and Teen Pregnancy	Mental Health and Risky Behaviors	Safety and Security	Education and Work-Life Balance
Accessible, adequate child care programs	X				
Parent education	X			X	X
Job training programs	X			X	
Post-secondary education; academic tutoring; non traditional education	X				X
Comprehensive sex education programs	X	X	X	X	
Mentoring programs		X		X	X
Antiviolence programs			X	X	
Making smart choices		X	X	X	
Leadership development				X	
Conflict management and anti-bullying			X	X	
Culturally specific programming	X	X	X	X	X
Self-esteem building; gender specific		X	X	X	X
Sports, athletic and fitness programs			X		
Coping skills; problem-solving			X		
Healthy body image		X	X	X	
Science/Math					X

5. Move toward a coordinated, holistic response to the state of girls in Minnesota.

Overwhelmingly, focus group participants urged a holistic approach and curriculum that helps girls see positive economic futures for themselves, builds their self esteem and aspirations, teaches them how to avoid teen pregnancy and other negative outcomes of risky sexual behavior, how to protect themselves from violence in their homes and communities, how to see beyond the rigid, stereotypical roles that have been assigned to women, how to avoid engagement in risky, self-destructive behaviors programs and encouraged them to stay in school, and pursue education that leads them to a brighter future.

“The communities of Minnesota should strive to find a common ground among all of these issues...especially using education to educate all students about these five problems.”

“There needs to be a multi-faceted set of solutions in order to fix the issues that are affecting Minnesota’s girls the most. The community has lost much faith in working together to solve issues. However, this is the best way that the community can change the status of girls: by working together, combining talents and resources, and being flexible.”

The components of such a coordinated programmatic response, based on information collected across the state, might be:

- **Parent education** – To help parents learn how to raise healthy daughters; to learn financial skills and money management; to learn how to help their children in school.
- **Comprehensive sex education** – To teach girls not only the biology of sex, but also how to protect and respect their bodies, the economic repercussions of teen pregnancy, healthy relationships, dating violence, etc.
- **Mentors** – To help girls make smart choices about sex, how to protect themselves from violence, build self esteem, and teach them about educational and career choices.
- **Post secondary and non traditional education** – Encouraging girls to pursue higher and/or post-secondary education, including math and science and other non traditional educational avenues, as the main vehicle toward brighter economic futures, to break the cycle of poverty.
- **Making smart choices** – In many areas of their lives, including reproductive health, avoidance of risky behaviors, prevention of violence, etc.
- **Build self-esteem to avoid risky behaviors** – First of all, girls need high self esteem to avoid risky behaviors, make good relationship choices, avoid teen pregnancy, make healthy choices about their sexual health, avoid violence, etc.

- **Maintain healthy body image** – To move beyond sexualized roles prescribed for women and avoid depression that results in eating disorders, unhealthy sexual relationships, and other risky behaviors, that when unchecked, increase girls’ suicidal thoughts.
- **Culturally specific programming** – Where appropriate, programs should be culturally specific, to allow diverse communities to deal with issues of reproductive health, violence, mental health, education, women’s roles, and economics, within their own cultural contexts and within the reality and context of racism in the larger society.

6. Specific environments, systems and institutions need to change, to assure equality and success for Minnesota’s girls.

Across the state, we heard about many environments that need to change to build girls’ success, from specific communities, to health care to education.

Perhaps the clearest call statewide was the need for *changes in educational systems* to build the economic and future success of girls and women in Minnesota, and *changes in the childcare system*, to support women’s educational and economic success.

- **Focus on girls in public schools** - Currently, schools are not viewed as environments that effectively support girls’ development. Many of the programmatic strategies outlined in this report require transformation of schools into environments that actively promote girls’ success, such as instituting specialized curricula and programs for girls that build their self-esteem and confidence, teaching girls about their sexual health, about preventive, positive responses to violence, about avoiding pregnancy, etc.

However, first and foremost, schools were perceived as needing to *prioritize and expand education* to include many more gender-specific opportunities for girls’ positive development. Furthermore, participants across the state agreed that *communities* must drive this transformation.

The following comments illustrate this point:

“The community and government need to do whatever they can to support these girls to go to college and continue their learning and not engage in risky behaviors.”

“All of the topics covered by the *Status of Girls in Minnesota* report all relate to the issue of education. These issues cannot be separated from education. Girls and boys need programs, such as mentors or gender-specific classes, which will teach the correct things that they need to learn in order to succeed in life. Once girls are armed

with the correct tools, they will least likely turn to risky behaviors, such as dating older men and getting pregnant.”

“Education must be heavily supported by the community and its members. The education bar must be raised.”

“Expectations in schools must be raised for its students. The schools need to become a greater part of the community, and therefore should establish community programs in the schools.”

If schools were transformed by communities, the some of the following outcomes would more likely be seen:

- Mandatory self-esteem classes for girls in middle schools.
- More guidance counselors available to mentor and address girls’ needs.
- Safe schools, free of violence, with explicit policies against bullying and harassment of girls.
- Curriculum focused on girls.
- Engaged parents.

CONCLUSION

THE STATEWIDE FOCUS GROUP FINDINGS AND recommendations cited in this report are intended to serve as a tool for communities, advocates, educators, and policy makers to help move Minnesota's girls forward to reach their full potential in life. Just as girls' challenges are shared obstacles that impede Minnesota from reaching its full potential, girls' triumphs are shared successes. Ultimately, Minnesota benefits when girls thrive.

Progressive policy, continued advocacy, and increased philanthropy, as well as mentorship and community support, will be key to ensuring that girls in Minnesota continue moving forward towards lives of economically successful, healthy, vibrant women.

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